

MIED (Rev. 03/11) Prisoner Civil Rights Complaint



Official Use On	ily	
Case Number	Judge	Case: Judge MJ: W
		Filed:

Case:2:15-cv-13009 Judge: Steeh, George Caram MJ: Whalen, R. Steven Filed: 08-19-2015 At 09:24 AM PRIS DIANE LEWIS V ST. JOHN'S HOSPITAL, ET AL (LG)

# PRISONER CIVIL RIGHTS COMPLAINT

This form is for use by state prisoners filing under 42 U.S.C. § 1983 and federal prisoners filing pursuant to Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971).

			)
Place of Confinement Women's Hur	on Valley Correctio	nal Faci	ility
Street 3201 Bemis Road	Chy Ypsilanti	Sporte Mi	Zip Code 48197
Are there additional plaintiffs?	Yes <sup>X</sup> No		

Defendant's Information		Position		
Street/P.O. Box 22101 Moross	city Detro	it	StateMi	<b>Zip Code</b> 48236
Are you suing this defendant in his/her:	Personal Capacity	XI Official Capac	ity 🗆 Bot	h Capacities
Are you suing more than one defendant?	Yes	□ No		
If yes, any additional defendants to this action attached to the back of this complaint. You mu	should be listed on a	a separate 8½" x 11' es, positions, currei	sheet of pap nt addresses	er and securely and the capacity



ADDITIONAL DEFENDANTS

Name Position
Marisa A Soave PA Resident

Steet City State Zip 22101 Moross Detroit Mi 48236

I am suing in professional capacity

Name Position
Jan L Mourelatos MD Doctor

Street City State Zip 22101 Moross Detroit Mi 48236

I am suing in professional capacity

Both are-were employed at St. John's Hospital when I went there seeking medical treatment for my injured finger.

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#### I. PREVIOUS LAWSUITS

Have you filed any	other lawsuits in state	or federal of	court relating to your
imprisonment?			

□ Yes 💆 No

If "Yes," complete the following section. If "No," proceed to Part II.

Please list all prior civil actions or appeals that you have filed in federal court while you have been incarcerated.

Docket or Case Number:	
Name of Court:	
Parties (Caption or Name of Case):	
Disposition:	The second secon
Docket or Case Number:	
Name of Court:	
Parties (Caption or Name of Case):	
Disposition:	
Docket or Case Number:	
Name of Court:	
Parties (Caption or Name of Case):	
Disposition:	

Any additional civil actions should be listed on a separate sheet of 8½" x11" paper and securely attached to the back of this complaint.

#### II. STATEMENT OF FACTS

On 9-24-13 I went to the emergency room at St. John's Hospital 22101 Moross Detroit, Mi 48236 (313) 343-3733, I was triaged because I had cut my right index finger on the middle knuckle pretty deep, my finger was bent down and I was unabble to move it, this was on my writing hand and I was seeking medical treatment.

I was evaluated by a Dr. Soave who agreed my finger was cutb but sent me down to xray for further evaluation as to why I couldn't use my finger. The x-ray was evaluated and dictated by Dr. Mourelatos who didn't find any abnormalities and didn't send me or request further testing. Dr. Soave came back and simply wrapped my finger with guaze, gave me something for the pain and a prescription for an antibiotic and my discharge instructions.

I was ' led to believe if I followed their instructions that my finger would heal back to normal as all they said it was, was a laceration to my finger.

My finger healed on the outside, yet I still couldn't move it yet. Because I trusted the Doctors from St. John's I thought the inside of my finger was just taking longer to heal, after all they "didn't" find any abnormalities.

Then I accidentilly hit my finger, as it was awkward, while cleaning my friend's house and the skin broke open and the pain was unbarable and I knew my finger wasn't right. So my friend took me to the emergency room at McLaren General Hospital, 1000 Harrington Mt. Clemens, Mi 48043 (810) 493-8000. I was triaged, then examined by a group of student Doctors who said they had never seen anything like it, then the two top Ostio Doctors came to me telling me that I would be admitted for emergency surgery. After explaining to them what happened and x-rays, and other testing I was told that the reason my finger never healed was that when I originally cut it the tendon was also severed and when I went to St. John's for treatment they should have found that. Because they (St. John's) missed my tendon wheing severed my finger was never given the chance to heal properly. And what happened was that my bone above the joint and my joint rubbed together so much that I got a hole in my bone and my joint was rubbing down to nothing. The Doctors weren't even sure if they could save my finger and they did but even after stitches and stints and pins to hold my finger together, my finger is a deformity and I don't even know if my tendon can ever really be fixed right, because it has shrunk and is twisting my finger still. My finger is useless now and will be unless I can get some kind of reconstructive/cosmetic surgery. I still cannot bend it and it is stuck in a bent position. And I believe all of this could have been avoided if I had been properly diagnosed and treated when I first -went to St. John's, and if they can't tell what's wrong that's what they have "further testing" for My finger also doesn't have the same blood flow and I don't have feeling in it like I do in my other fingers. I have no stamina for writing and have had to learn to do things with another finger or my other hand.

My finger, will never be the same because noone at that hospital took the time to really find out what was wrong with my finger. And I have had to suffer because of it.

PA

## IL STATEMENT OF CLAIMS

The 8th Amendment to the U.S. Constitution was violated in the way of cruel and unusual punishment in regards to the negligent medical care I received on my visit to the emergency room at St. John's Hospital, Detroit in the care of Marisa Soure 🛤 🗥 O Jan Mourelatos MD The facts are that when I went in seeking medical treatment, I ended up with more pain and suffering than I started out with. I am also now in debt to 2 hospitals, I was unable to hold a job for quite a while, therefore could not support myself. I couldn't write with my right hand for almost a year, I had to teach myself how to do everything I would normally do with my right hand, now with my left, I suffered ealot of pain and couldn't even afford my medication. I had to go to St. Vincent dePaul for food assistance. I will live with my finger in this deformed state for the rest of my life, unless there is some hope of reconstructive surgury. I still cannot write for any real long length of time as the circulation in my finger is not very good and after awhile my finger goes numb and on top of my knuckle I have almost no feeling left at all. This will effect me for the rest of my life.

### IV STATEMENT OF RELIEF

I owe hospital bills to two different hospitals

I was unable to work due to having to have surgery, heal and waiting for the original injury to heal that never healed due to not being diagnosed correctly

I need to have more surgery both reconstructive and cosmetic

I am seeking damages for pain and suffering

Also for loss of consortium

Loss of finanial, fimilial and social damages

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WIED (Nov. 03-11) Tissue	
I declare (or certify, verification foregoing is true and co	fy, or state) under penalty of perjury that the rrect.
Executed (signed) on	, 2015 (date).
	Diana Sein
	Signature of Plaintiff
	Diana L. Lewis

## **CIVIL COVER SHEET FOR PRISONER CASES**

Case No. 15-13009 Judge: George Caram	n Steeh Magistrate Judge: R. Steven Whalen
Name of 1 <sup>st</sup> Listed Plaintiff/Petitioner:	Name of 1 <sup>st</sup> Listed Defendant/Respondent:
DIANA L. LEWIS	ST. JOHN HOSPITAL
Inmate Number: 390410	Additional Information:
Plaintiff/Petitioner's Attorney and Address Information:	
Correctional Facility: Huron Valley Women's Correctional Facility 3201 Bemis Road Ypsilanti, MI 48197 WASHTENAW COUNTY	
BASIS OF JURISDICTION  ☐ 2 U.S. Government Defendant ☑ 3 Federal Question  NATURE OF SUIT ☐ 530 Habeas Corpus ☐ 540 Mandamus ☑ 550 Civil Rights ☐ 555 Prison Conditions	ORIGIN  ☑ 1 Original Proceeding  ☐ 5 Transferred from Another District Court  ☐ Other:  FEE STATUS  ☑ IFP <i>In Forma Pauperis</i> ☐ PD Paid
PURSUANT TO LOCAL RULE 83.11  1. Is this a case that has been previously dismissed?  ☐ Yes ☒ No  ➤ If yes, give the following information:  Court:  Case No:  Judge:	
other court, including state court? (Companion cases are	